

**Fill in this information to identify your case:**

United States Bankruptcy Court for the:

DISTRICT OF NEVADA

Case number (if known)

Chapter

11

☐ Check if this an amended filing

## Official Form 201

**Voluntary Petition for Non-Individuals Filing for Bankruptcy**

04/20

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and the case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name Gata HF, LLC

2. All other names debtor used in the last 8 years

Include any assumed names, trade names and *doing business as* names

3. Debtor's federal Employer Identification Number (EIN) 83-2861862

4. Debtor's address

Principal place of business

Mailing address, if different from principal place of business

9381 Homestead Rd.  
Pahrump, NV 89061-8839

Number, Street, City, State &amp; ZIP Code

1463 Graystone Canyon Ave.  
Las Vegas, NV 89183-6306

P.O. Box, Number, Street, City, State &amp; ZIP Code

Nye  
County

Location of principal assets, if different from principal place of business

Number, Street, City, State &amp; ZIP Code

5. Debtor's website (URL)

6. Type of debtor

☒ Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP))☐ Partnership (excluding LLP)☐ Other. Specify:

Debtor Gata HF, LLC  
Name

Case number (if known) \_\_\_\_\_

**7. Describe debtor's business****A. Check one:**

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
- ☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
- ☐ Railroad (as defined in 11 U.S.C. § 101(44))
- ☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
- ☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
- ☐ Clearing Bank (as defined in 11 U.S.C. § 781(3))
- ☒ None of the above

**B. Check all that apply**

- ☐ Tax-exempt entity (as described in 26 U.S.C. §501)
- ☐ Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. §80a-3)
- ☐ Investment advisor (as defined in 15 U.S.C. §80b-2(a)(11))

**C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor.**  
See <http://www.uscourts.gov/four-digit-national-association-naics-codes>.

1119**8. Under which chapter of the Bankruptcy Code is the debtor filing?****Check one:**

- ☐ Chapter 7
- ☐ Chapter 9

☒ Chapter 11. **Check all that apply:**

A debtor who is a "small business debtor" must check the first sub-box. A debtor as defined in § 1182(1) who elects to proceed under subchapter V of chapter 11 (whether or not the debtor is a "small business debtor") must check the second sub-box.

- ☐ The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D), and its aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,725,625. If this sub-box is selected, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
- ☒ The debtor is a debtor as defined in 11 U.S.C. § 1182(1), its aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$7,500,000, **and it chooses to proceed under Subchapter V of Chapter 11.** If this sub-box is selected, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return, or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
- ☐ A plan is being filed with this petition.
- ☐ Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
- ☐ The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the *Attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11* (Official Form 201A) with this form.
- ☐ The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.

☐ Chapter 12**9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?**

- ☒ No.
- ☐ Yes.

If more than 2 cases, attach a separate list.

District	_____	When	_____	Case number	_____
District	_____	When	_____	Case number	_____

Debtor Gata HF, LLC  
Name

Case number (if known) \_\_\_\_\_

10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?
- ☒ No  
☐ Yes.

List all cases. If more than 1, attach a separate list

Debtor \_\_\_\_\_ Relationship \_\_\_\_\_  
District \_\_\_\_\_ When \_\_\_\_\_ Case number, if known \_\_\_\_\_

11. Why is the case filed in this district? *Check all that apply:*
- ☒ Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.
- ☐ A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?
- ☒ No  
☐ Yes. Answer below for each property that needs immediate attention. Attach additional sheets if needed.
- Why does the property need immediate attention? (Check all that apply.)**
- ☐ It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.  
What is the hazard? \_\_\_\_\_
- ☐ It needs to be physically secured or protected from the weather.
- ☐ It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).
- ☐ Other \_\_\_\_\_
- Where is the property?** \_\_\_\_\_  
Number, Street, City, State & ZIP Code
- Is the property insured?**
- ☐ No
- ☐ Yes. Insurance agency \_\_\_\_\_  
Contact name \_\_\_\_\_  
Phone \_\_\_\_\_

### Statistical and administrative information

13. Debtor's estimation of available funds. *Check one:*
- ☒ Funds will be available for distribution to unsecured creditors.
- ☐ After any administrative expenses are paid, no funds will be available to unsecured creditors.

14. Estimated number of creditors
- |  |  |  |
|--|--|--|
| <input checked="" type="checkbox"/> 1-49 | <input type="checkbox"/> 1,000-5,000   | <input type="checkbox"/> 25,001-50,000     |
| <input type="checkbox"/> 50-99           | <input type="checkbox"/> 5001-10,000   | <input type="checkbox"/> 50,001-100,000    |
| <input type="checkbox"/> 100-199         | <input type="checkbox"/> 10,001-25,000 | <input type="checkbox"/> More than 100,000 |
| <input type="checkbox"/> 200-999         |  |  |

15. Estimated Assets
- |  |  |  |
|--|--|--|
| <input type="checkbox"/> \$0 - \$50,000          | <input checked="" type="checkbox"/> \$1,000,001 - \$10 million | <input type="checkbox"/> \$500,000,001 - \$1 billion     |
| <input type="checkbox"/> \$50,001 - \$100,000    | <input type="checkbox"/> \$10,000,001 - \$50 million           | <input type="checkbox"/> \$1,000,000,001 - \$10 billion  |
| <input type="checkbox"/> \$100,001 - \$500,000   | <input type="checkbox"/> \$50,000,001 - \$100 million          | <input type="checkbox"/> \$10,000,000,001 - \$50 billion |
| <input type="checkbox"/> \$500,001 - \$1 million | <input type="checkbox"/> \$100,000,001 - \$500 million         | <input type="checkbox"/> More than \$50 billion          |

16. Estimated liabilities
- |   |  |  |
|---|--|--|
| <input type="checkbox"/> \$0 - \$50,000 | <input checked="" type="checkbox"/> \$1,000,001 - \$10 million | <input type="checkbox"/> \$500,000,001 - \$1 billion |
|---|--|--|

Debtor

Gata HF, LLC

Case number (if known)

Name

☐ \$50,001 - \$100,000☐ \$10,000,001 - \$50 million☐ \$1,000,000,001 - \$10 billion☐ \$100,001 - \$500,000☐ \$50,000,001 - \$100 million☐ \$10,000,000,001 - \$50 billion☐ \$500,001 - \$1 million☐ \$100,000,001 - \$500 million☐ More than \$50 billion

Debtor Gata HF, LLC  
Name

Case number (if known) \_\_\_\_\_

**Request for Relief, Declaration, and Signatures****WARNING** -- Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.**17. Declaration and signature  
of authorized  
representative of debtor**

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

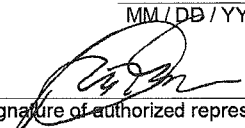
I have been authorized to file this petition on behalf of the debtor.

I have examined the information in this petition and have a reasonable belief that the information is true and correct.

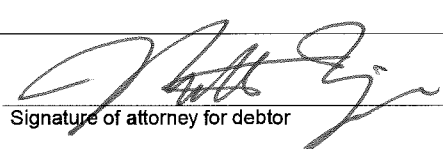
I declare under penalty of perjury that the foregoing is true and correct.

Executed on 10/19/2021

MM / DD / YYYY

**X**  
Signature of authorized representative of debtorPaul Thomas

Printed name

Title Manager of Gata IV, LLC as Sole Member**18. Signature of attorney****X**  
Signature of attorney for debtorDate 10/19/21

MM / DD / YYYY

Matthew C. Zirzow 7222

Printed name

Larson & Zirzow, LLC

Firm name

850 E. Bonneville Ave.Las Vegas, NV 89101

Number, Street, City, State &amp; ZIP Code

Contact phone 702-382-1170Email address mzirzow@lzlawnv.com7222 NV

Bar number and State

**Fill in this information to identify the case:**Debtor name Gata HF, LLCUnited States Bankruptcy Court for the: DISTRICT OF NEVADA

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filingOfficial Form 202**Declaration Under Penalty of Perjury for Non-Individual Debtors**

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

**WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.**

**Declaration and signature**

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☐ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☐ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☐ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☐ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☐ *Schedule H: Codebtors* (Official Form 206H)
- ☐ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☐ *Amended Schedule*
- ☒ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration \_\_\_\_\_

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 10/19/2021

x

\_\_\_\_\_  
Signature of individual signing on behalf of debtor

Paul Thomas

\_\_\_\_\_  
Printed name

Manager of Gata IV, LLC as Sole Member

\_\_\_\_\_  
Position or relationship to debtor

**Fill in this information to identify the case:**

Debtor name Gata HF, LLC  
 United States Bankruptcy Court for the: DISTRICT OF NEVADA  
 Case number (if known): \_\_\_\_\_

☐ Check if this is an  
 amended filing

**Official Form 204**
**Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders**
12/15

A list of creditors holding the 20 largest unsecured claims must be filed in a Chapter 11 or Chapter 9 case. Include claims which the debtor disputes. Do not include claims by any person or entity who is an insider, as defined in 11 U.S.C. § 101(31). Also, do not include claims by secured creditors, unless the unsecured claim resulting from inadequate collateral value places the creditor among the holders of the 20 largest unsecured claims.

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services, and government contracts)	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
John Casper 942 Villa Grande Way Boulder City, NV 89005		Unsecured loans				\$312,921.18
Edlin Kim c/o Compass Point Holdings, LLC 4525 Dean Martin Dr., Unit 1208 Las Vegas, NV 89103		Unsecured loans				\$205,000.00
Laura Perry 5953 Mabel Road, #120 Las Vegas, NV 89110		Personal loan				\$24,000.00
Shelley Wilde 265 Tuscany Ridges Heights NW Calgary AB Canada T3L 3B8		Personal loan				\$12,000.00

**ACTION BY WRITTEN CONSENT OF THE SOLE MANAGER AND MEMBER  
OF GATA HF, a Nevada limited liability company**

The undersigned, being the sole manager and member of GATA HF, LLC, a Nevada limited liability company (the "Company"), hereby approves and adopts the following resolutions effective as of October 18, 2021:

WHEREAS, the Company, having determined that in its judgment, and upon the advice of counsel, that it is desirable and in the best interests of the Company and its creditors and other interested parties that a voluntary petition for relief be filed under the chapter 11 of title 11 of the United States Code (the "Bankruptcy Code");

BE IT THEREFORE RESOLVED, the Company shall file a voluntary petition for relief under chapter 11, Subchapter V of the Bankruptcy Code in the U.S. Bankruptcy Court for the District of Nevada (the "Bankruptcy Court") and take all steps necessary thereto, and the Company is authorized to employ Larson & Zirzow, LLC to represent it in the proceeding.

BE IT FURTHER RESOLVED, that Paul Thomas, as the indirect manager and sole member of the Company (the "Authorized Person") shall be authorized, empowered and directed, in the name and on behalf of the Company, to execute and verify a petition, schedules, and any amendments thereto under chapter 11 of the Bankruptcy Code, and to cause the same to be filed with the Bankruptcy Court as soon as he shall determine, and take all other reasonable steps thereafter in such bankruptcy case, including without limitation the filing and confirmation of a plan of reorganization.

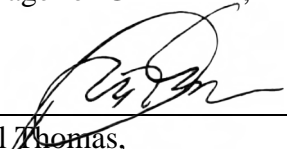
BE IT FURTHER RESOLVED, that the Authorized Person shall be designated as the responsible person in the Company's chapter 11 bankruptcy case pursuant to Fed. R. Bankr. P. 9001(5), and is authorized and directed to appear in all bankruptcy proceedings on behalf of the Company, and to otherwise do and perform all acts and deeds and to execute and deliver all necessary documents on behalf of the Company in connection with such bankruptcy case.

BE IT FURTHER RESOLVED that any and all past actions taken by the Authorized Person of the Company in the name and on behalf of the Company in furtherance of any or all of the preceding resolutions be, and the same hereby are, ratified, confirmed, and approved.

IN WITNESS WHEREOF, the undersigned, constituting all of the Directors of the Company, by execution hereof, hereby approve the foregoing.

GATA HF, LLC,  
a Nevada limited liability company:

By: GATA IV, LLC,  
a Nevada limited liability company  
as Manager of GATA HF, LLC

By:   
Paul Thomas,  
as Sole Manager of GATA IV, LLC  
as Sole Member of GATA HF, LLC



**United States Bankruptcy Court  
District of Nevada**

In re Gata HF, LLC

Debtor(s)

Case No.

Chapter

11

**VERIFICATION OF CREDITOR MATRIX**

I, the Manager of Gata IV, LLC as Sole Member of the corporation named as the debtor in this case, hereby verify that the attached list of creditors is true and correct to the best of my knowledge.

Date: 10/19/2021



Paul Thomas/Manager of Gata IV, LLC as Sole Member  
Signer/Title

Gata HF, LLC  
1463 Graystone Canyon Ave.  
Las Vegas, NV 89183-6306

Internal Revenue Service  
Attn: Bankruptcy Dept/Managing Agent  
P.O. Box 7346  
Philadelphia, PA 19101

Clark County Treasurer  
c/o Bankruptcy Clerk  
500 S. Grand Central Pkwy  
P.O. Box 551220  
Las Vegas, NV 89155

Clark County Assessor  
c/o Bankruptcy Clerk  
500 S. Grand Central Pkwy  
Box 551401  
Las Vegas, NV 89155

Dept. of Empl, Training & Rehab  
Employment Security Division  
500 East Third Street  
Carson City, NV 89713

Nevada Dept. of Taxation  
Bankruptcy Section  
555 E. Washington Avenue #1300  
Las Vegas, NV 89101

Social Security Administration  
Attn: Bankruptcy Desk/Managing Agent  
PO Box 33021  
Baltimore, MD 21290-3021

David Leventhal  
2260 Village Walk Dr., Ste.1204  
Reno, NV 89502

Freedom Fries, LLC  
c/o Laura Perry, Managing Member  
5953 Mabel Rd., #120  
Las Vegas, NV 89110

Judith Zakalik, Esq.  
6173 S. Rainbow Blvd.  
Las Vegas, NV 89118

NV Captial Corporation, LLC  
c/o John R. Blackmon, Registered Agent  
410 S. Rampart Blvd., Ste. 350  
Las Vegas, NV 89145

Nye County Treasurer  
Attn: John W. Prudhont  
P.O. Box 473  
Tonopah, NV 89049

Paul Thomas  
1463 Graystone Canyon Ave.  
Las Vegas, NV 89183

Bryan Foster  
c/o NV Capital Corporation LLC  
8880 W. Sunset Rd., Ste. 190  
Las Vegas, NV 89148

Christian Madsen  
c/o NV Capital Corporation LLC  
8880 W. Sunset Rd., Ste. 190  
Las Vegas, NV 89148

Denise Vinci, Trustee of the Vinci  
Family Trust dtd 3/16/2007  
c/o NV Capital Corporation LLC  
8880 W. Sunset Rd., Ste. 190  
Las Vegas, NV 89148

Eduardo Castillo and Alondra Castillo  
Living Trust dtd 12/19/2017  
c/o NV Capital Corporation LLC  
8880 W. Sunset Rd., Ste. 190  
Las Vegas, NV 89148

FCI Lender Services, Inc.  
c/o Cogency Global, Inc.,  
Registered Agent  
321 W. Winnie Lane #104  
Carson City, NV 89703

FCI Lender Services, Inc.  
8180 E. Kaiser Blvd.  
Anaheim, CA 92808

First Savings Bank as Custodian for  
Russell S. Bono, SEP IRA  
c/o NV Capital Corporation LLC  
8880 W. Sunset Rd., Ste. 190  
Las Vegas, NV 89148

Freedom Fries, LLC  
c/o Terraformance, LLC  
Attn: Jason P. Hoffman, Manager  
102620 Southern Highlands Pkwy, #  
Las Vegas, NV 89141

Nevada Trust Deed Services  
10161 Park Run Dr., Ste. 150  
Las Vegas, NV 89145

NV Captial Corporation, LLC  
c/o John R. Blackmon, Manager  
410 S. Rampart Blvd., Ste. 350  
Las Vegas, NV 89145

Starlight Funding, LLC  
Attn: Carol Theisen, Manager  
c/o NV Capital Corporation LLC  
8880 W. Sunset Rd., Ste. 190  
Las Vegas, NV 89148

The Howard Family Trust dtd 3/7/1997  
Charles Howard, Trustee  
c/o NV Capital Corporation LLC  
8880 W. Sunset Rd., Ste. 190  
Las Vegas, NV 89148

Yukiko Minami  
c/o NV Capital Corporation LLC  
8880 W. Sunset Rd., Ste. 190  
Las Vegas, NV 89148

Gata IV, LLC  
Attn: Paul Thomas  
1463 Graystone Canyon Ave.  
Las Vegas, NV 89123

Form **1065**Department of the Treasury  
Internal Revenue Service**U.S. Return of Partnership Income**For calendar year 2019, or tax year beginning \_\_\_\_\_, 2019,  
ending \_\_\_\_\_, 20\_\_\_\_.Go to [www.irs.gov/Form1065](http://www.irs.gov/Form1065) for instructions and the latest information.

OMB No. 1545-0023

**2019****A** Principal business activity**OTHER CROP PROD****B** Principal product or service**PRODUCT****C** Business code number

111900

Type  
or  
PrintGATA HF LLC  
1463 GRAYSTONE CANYON AVE  
LAS VEGAS, NV 89183**D** Employer identification no.

1862

**E** Date business started

12/18/2018

**F** Total assets (see instructions)

\$ 1,856,270.

**G** Check applicable boxes: (1) ☐ Initial return (2) ☐ Final return (3) ☐ Name change (4) ☐ Address change (5) ☐ Amended return**H** Check accounting method: (1) ☒ Cash (2) ☐ Accrual (3) ☐ Other (specify) \_\_\_\_\_**I** Number of Schedules K-1. Attach one for each person who was a partner at any time during the tax year \_\_\_\_\_ **2****J** Check if Schedules C and M-3 are attached. \_\_\_\_\_ ☐**K** Check if partnership: (1) ☐ Aggregated activities for section 465 at-risk purposes (2) ☐ Grouped activities for section 469 passive activity purposes**Caution.** Include only trade or business income and expenses on lines 1a through 22 below. See the instructions for more information.

INCOME	1 a	Gross receipts or sales	1 a	
	b	Returns and allowances	1 b	
	c	Balance. Subtract line 1b from line 1a	1 c	
	2	Cost of goods sold (attach Form 1125-A)	2	
	3	Gross profit. Subtract line 2 from line 1c	3	
	4	Ordinary income (loss) from other partnerships, estates, and trusts (attach statement)	4	
	5	Net farm profit (loss) (attach Schedule F (Form 1040 or 1040-SR))	5	
	6	Net gain (loss) from Form 4797, Part II, line 17 (attach Form 4797)	6	
DEDUCTIONS FOR LIMITATIONS	7	Other income (loss) (attach statement)	7	
	8	<b>Total income (loss).</b> Combine lines 3 through 7	8	
	9	Salaries and wages (other than to partners) (less employment credits)	9	
	10	Guaranteed payments to partners	10	
	11	Repairs and maintenance	11	4,584.
	12	Bad debts	12	
	13	Rent	13	26,798.
	14	Taxes and licenses	14	3,723.
	15	Interest (see instructions)	15	65,798.
	16 a	Depreciation (if required, attach Form 4562)	16 a	23,912.
	b	Less depreciation reported on Form 1125-A and elsewhere on return	16 b	
	16 c		16 c	23,912.
17	Depletion (Do not deduct oil and gas depletion.)	17		
18	Retirement plans, etc.	18		
19	Employee benefit programs	19		
20	Other deductions (attach statement) See Statement 1	20	61,873.	
21	<b>Total deductions.</b> Add the amounts shown in the far right column for lines 9 through 20	21	186,688.	
TAX AND PAYMENT	22	<b>Ordinary business income (loss).</b> Subtract line 21 from line 8	22	-186,688.
	23	Interest due under the look-back method — completed long-term contracts (attach Form 8867)	23	
	24	Interest due under the look-back method — income forecast method (attach Form 8866)	24	
	25	BBA AAR imputed underpayment (see instructions)	25	
	26	Other taxes (see instructions)	26	
	27	<b>Total balance due.</b> Add lines 23 through 26	27	
	28	Payment (see instructions)	28	
	29	<b>Amount owed.</b> If line 28 is smaller than line 27, enter amount owed	29	
	30	<b>Overpayment.</b> If line 28 is larger than line 27, enter overpayment	30	

**Sign Here**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than partner or limited liability company member) is based on all information of which preparer has any knowledge.

Signature of partner or limited liability company member

Date

May the IRS discuss this return with the preparer shown below? See instructions. ☒ Yes ☐ No**Paid Preparer Use Only**

Print preparer's name

George E. Garr

Preparer's signature

George E. Garr

Date

Check ☒ if self-employed

PTIN

Firm's name — George E. Garr CPA

Firm's EIN —

Firm's address — 6621 E. Pacific Coast Hwy., Suite 230

Phone no. (562) 596-4024

Long Beach, CA 90803

Form 1065 (2019) GATA HF LLC

1862

Page 2

**Schedule B Other Information**

1 What type of entity is filing this return? Check the applicable box:				Yes	No
a <input type="checkbox"/> Domestic general partnership	b <input type="checkbox"/> Domestic limited partnership				
c <input checked="" type="checkbox"/> Domestic limited liability company	d <input type="checkbox"/> Domestic limited liability partnership				
e <input type="checkbox"/> Foreign partnership	f <input type="checkbox"/> Other				
2 At the end of the tax year:					
a Did any foreign or domestic corporation, partnership (including any entity treated as a partnership), trust, or tax-exempt organization, or any foreign government own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital of the partnership? For rules of constructive ownership, see instructions. If "Yes," attach Schedule B-1, Information on Partners Owning 50% or More of the Partnership.				X	
b Did any individual or estate own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital of the partnership? For rules of constructive ownership, see instructions. If "Yes," attach Schedule B-1, Information on Partners Owning 50% or More of the Partnership.					X
3 At the end of the tax year, did the partnership:					
a Own directly 20% or more, or own, directly or indirectly, 50% or more of the total voting power of all classes of stock entitled to vote of any foreign or domestic corporation? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (iv) below.					X
(i) Name of Corporation		(ii) Employer Identification Number (if any)	(iii) Country of Incorporation	(iv) Percentage Owned in Voting Stock	
b Own directly an interest of 20% or more, or own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital in any foreign or domestic partnership (including an entity treated as a partnership) or in the beneficial interest of a trust? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (v) below.					X
(i) Name of Entity		(ii) Employer Identification Number (if any)	(iii) Type of Entity	(iv) Country of Organization	(v) Maximum Percentage Owned in Profit, Loss, or Capital
4 Does the partnership satisfy all four of the following conditions?				Yes	No
a The partnership's total receipts for the tax year were less than \$250,000.					
b The partnership's total assets at the end of the tax year were less than \$1 million.					
c Schedules K-1 are filed with the return and furnished to the partners on or before the due date (including extensions) for the partnership return.					
d The partnership is not filing and is not required to file Schedule M-3. If "Yes," the partnership is not required to complete Schedules L, M-1, and M-2; item F on page 1 of Form 1065; or item L on Schedule K-1.					X
5 Is this partnership a publicly traded partnership as defined in section 469(k)(2)?					X
6 During the tax year, did the partnership have any debt that was canceled, was forgiven, or had the terms modified so as to reduce the principal amount of the debt?					X
7 Has this partnership filed, or is it required to file, Form 8918, Material Advisor Disclosure Statement, to provide information on any reportable transaction?					X
8 At any time during calendar year 2019, did the partnership have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). If "Yes," enter the name of the foreign country.					X
9 At any time during the tax year, did the partnership receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If "Yes," the partnership may have to file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts. See instructions.					X
10a Is the partnership making, or had it previously made (and not revoked), a section 754 election? See instructions for details regarding a section 754 election.					X
b Did the partnership make for this tax year an optional basis adjustment under section 743(b) or 744(b)? If "Yes," attach a statement showing the computation and allocation of the basis adjustment. See instructions.					X

BAA

PTPA0112 10/02/19

Form 1065 (2019)

Form 1065 (2019) GATA HF LLC

1862

Page 3

**Schedule B** Other Information (continued)

	Yes	No
c Is the partnership required to adjust the basis of partnership assets under section 743(b) or 734(b) because of a substantial built-in loss (as defined under section 743(c)) or substantial basis reduction (as defined under section 734(c))? If "Yes," attach a statement showing the computation and allocation of the basis adjustment. See instructions.		X
11 Check this box if, during the current or prior tax year, the partnership distributed any property received in a like-kind exchange or contributed such property to another entity (other than disregarded entities wholly owned by the partnership throughout the tax year).	<input type="checkbox"/>	
12 At any time during the tax year, did the partnership distribute to any partner a tenancy-in-common or other undivided interest in partnership property?		X
13 If the partnership is required to file Form 8858, Information Return of U.S. Persons With Respect To Foreign Disregarded Entities (FDEs) and Foreign Branches (FBs), enter the number of Forms 8858 attached. See instructions.		
14 Does the partnership have any foreign partners? If "Yes," enter the number of Forms 8805, Foreign Partner's Information Statement of Section 1446 Withholding Tax, filed for this partnership.		X
15 Enter the number of Forms 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships, attached to this return.		
16a Did you make any payments in 2019 that would require you to file Form(s) 1099? See instructions.		X
b If "Yes," did you or will you file required Form(s) 1099?		
17 Enter the number of Forms 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations, attached to this return.		
18 Enter the number of partners that are foreign governments under section 892.	0	
19 During the partnership's tax year, did the partnership make any payments that would require it to file Form 1042 and 1042-S under chapter 3 (sections 1441 through 1464) or chapter 4 (sections 1471 through 1474)?		X
20 Was the partnership a specified domestic entity required to file Form 8938 for the tax year? See the Instructions for Form 8938.		X
21 Is the partnership a section 721(c) partnership, as defined in Regulations section 1.721(c)-1T(b)(14)?		X
22 During the tax year, did the partnership pay or accrue any interest or royalty for which the deduction is not allowed under section 267A? See instructions. If "Yes," enter the total amount of the disallowed deductions.		\$
23 Did the partnership have an election under section 163(j) for any real property trade or business or any farming business in effect during the tax year? See instructions.		X
24 Does the partnership satisfy one or more of the following? See instructions.		X
a The partnership owns a pass-through entity with current, or prior year carryover, excess business interest expense.		
b The partnership's aggregate average annual gross receipts (determined under section 448(c)) for the 3 tax years preceding the current tax year are more than \$26 million and the partnership has business interest.		
c The partnership is a tax shelter (see instructions) and the partnership has business interest expense.		
If "Yes" to any, complete and attach Form 8990.		
25 Is the partnership electing out of the centralized partnership audit regime under section 6221(b)? See instructions. If "Yes," the partnership must complete Schedule B-2 (Form 1065). Enter the total from Schedule B-2, Part III, line 3.		X
If "No," complete Designation of Partnership Representative below.		

**Designation of Partnership Representative** (see instructions)

Enter below the information for the partnership representative (PR) for the tax year covered by this return.

Name of PR ▶ GATA IV LLC

U.S. address of PR ▶ 1463 GRAYSTONE CANYON AVE  
LAS VEGAS, NV 89183

U.S. phone number of PR ▶ (562) 596-4024

If the PR is an entity, name of the designated individual for the PR ▶ PAUL THOMAS MBR

U.S. address of designated individual ▶ 1463 GRAYSTONE CANYON AVE  
LAS VEGAS, NV 89183

U.S. phone number of designated individual ▶ (562) 596-4024

26 Is the partnership attaching Form 8996 to certify as a Qualified Opportunity Fund? If "Yes," enter the amount from Form 8996, line 14.		X
27 Enter the number of foreign partners subject to section 864(c)(3) as a result of transferring all or a portion of an interest in the partnership or of receiving a distribution from the partnership.		
28 At any time during the tax year, were there any transfers between the partnership and its partners subject to the disclosure requirements of Regulations section 1.707-8?		X

BAA

PTPAG112 10/02/19

Form 1065 (2019)



Form 1065 (2019) GATA HF LLC

1862

Page 4

Schedule K Partners' Distributive Share Items		Total amount	
Income (Loss)	1 Ordinary business income (loss) (page 1, line 22)	1	-186,688.
	2 Net rental real estate income (loss) (attach Form 8825)	2	
	3a Other gross rental income (loss)	3a	
	b Expenses from other rental activities (attach stmt)	3b	
	c Other net rental income (loss). Subtract line 3b from line 3a	3c	
	4 Guaranteed payments: a Services 4a b Capital 4b	4c	
	c Total. Add lines 4a and 4b	4c	
	5 Interest income	5	
	6 Dividends and dividend equivalents: a Ordinary dividends b Qual. fed dividends 6b c Dividend equivalents 6c	6a	
	7 Royalties	7	
	8 Net short-term capital gain (loss) (attach Schedule D (Form 1065))	8	
Income (Loss)	9a Net long-term capital gain (loss) (attach Schedule D (Form 1065))	9a	
	b Collectibles (28%) gain (loss)	9b	
	c Unrecaptured section 1250 gain (attach statement)	9c	
10 Net section 1231 gain (loss) (attach Form 4797)	10		
11 Other income (loss) (see instructions) Type ▶	11		
Deductions	12 Section 179 deduction (attach Form 4562)	12	
	13a Contributions	13a	
	b Investment interest expense	13b	
	c Section 59(e)(2) expenditures: (1) Type ▶ (2) Amount ▶	13c(2)	
d Other deductions (see instructions) Type ▶	13d		
Self-Employment	14a Net earnings (loss) from self-employment	14a	
	b Gross farming or fishing income	14b	
	c Gross nonfarm income	14c	
Credits	15a Low-income housing credit (section 42(j)(5))	15a	
	b Low-income housing credit (other)	15b	
	c Qualified rehabilitation expenditures (rental real estate) (attach Form 3468, if applicable)	15c	
	d Other rental real estate credits (see instructions) Type ▶	15d	
	e Other rental credits (see instructions) Type ▶	15e	
	f Other credits (see instructions) Type ▶	15f	
Foreign Transactions	16a Name of country or U.S. possession ▶		
	b Gross income from all sources	16b	
	c Gross income sourced at partner level	16c	
	Foreign gross income sourced at partnership level		
	d Reserved for future use ▶ e Foreign branch category ▶	16e	
	f Passive category ▶ g General category ▶ h Other (att. stmt.) ▶	16h	
	Deductions allocated and apportioned at partner level		
	i Interest expense ▶ j Other ▶	16j	
	Deductions allocated and apportioned at partnership level to foreign source income		
	k Reserved for future use ▶ l Foreign branch category ▶	16l	
	m Passive category ▶ n General category ▶ o Other (att. stmt.) ▶	16o	
	p Total foreign taxes (check one): ▶ Paid <input type="checkbox"/> Accrued <input type="checkbox"/>	16p	
q Reduction in taxes available for credit (attach statement)	16q		
r Other foreign tax information (attach statement)			
Alternative Minimum Tax (AMT) Items	17a Post-1986 depreciation adjustment	17a	86.
	b Adjusted gain or loss	17b	
	c Depletion (other than oil and gas)	17c	
	d Oil, gas, and geothermal properties — gross income	17d	
	e Oil, gas, and geothermal properties — deductions	17e	
	f Other AMT items (attach stmt)	17f	
Other Information	18a Tax-exempt interest income	18a	
	b Other tax-exempt income	18b	
	c Nondeductible expenses	18c	
	19a Distributions of cash and marketable securities	19a	
	b Distributions of other property	19b	
	20a Investment income	20a	
b Investment expenses	20b		
c Other items and amounts (attach stmt)			

Form 1065 (2019) GATA HF LLC

1862

Page 5

**Analysis of Net Income (Loss)**

<b>1</b> Net income (loss). Combine Schedule K, lines 1 through 11. From the result, subtract the sum of Schedule K, lines 12 through 13d, and 16a. .... <b>1</b> -186,688.						
<b>2</b> Analysis by partner type:	(i) Corporate	(ii) Individual (active)	(iii) Individual (passive)	(iv) Partnership	(v) Exempt Organization	(vi) Nominee/Other
<b>a</b> General partners						
<b>b</b> Limited partners				-186,688.		

<b>Schedule L</b> Balance Sheets per Books		Beginning of tax year		End of tax year	
Assets		(a)	(b)	(c)	(d)
<b>1</b> Cash					
<b>2a</b> Trade notes and accounts receivable					
<b>b</b> Less allowance for bad debts					
<b>3</b> Inventories			85,082.		528,920.
<b>4</b> U.S. government obligations					
<b>5</b> Tax-exempt securities					
<b>6</b> Other current assets (attach stmt)					
<b>7a</b> Loans to partners (or persons related to partners)					
<b>b</b> Mortgage and real estate loans					
<b>8</b> Other investments (attach stmt)					
<b>9a</b> Buildings and other depreciable assets		15,187.		176,514.	
<b>b</b> Less accumulated depreciation		67.	15,120.	23,979.	152,535.
<b>10a</b> Depletable assets					
<b>b</b> Less accumulated depletion					
<b>11</b> Land (net of any amortization)			1,174,815.		1,174,815.
<b>12a</b> Intangible assets (amortizable only)					
<b>b</b> Less accumulated amortization					
<b>13</b> Other assets (attach stmt) See St. 2			4.		
<b>14</b> Total assets			1,275,021.		1,856,270.
<b>Liabilities and Capital</b>					
<b>15</b> Accounts payable					
<b>16</b> Mortgages, notes, bonds payable in less than 1 year					
<b>17</b> Other current liabilities (attach stmt)					
<b>18</b> All nonrecourse loans					
<b>19a</b> Loans from partners (or persons related to partners)					
<b>b</b> Mortgages, notes, bonds payable in 1 year or more			991,026.		991,023.
<b>20</b> Other liabilities (attach stmt)					
<b>21</b> Partners' capital accounts			283,995.		865,247.
<b>22</b> Total liabilities and capital			1,275,021.		1,856,270.

**Schedule M-1 Reconciliation of Income (Loss) per Books With Income (Loss) per Return****Note:** The partnership may be required to file Schedule M-3. See instructions.

<b>1</b> Net income (loss) per books	-186,688.	<b>6</b> Income recorded on books this year not included on Schedule K, lines 1 through 11 (itemize):	
<b>2</b> Income included on Schedule K, lines 1, 2, 3c, 5, 6a, 7, 8, 9a, 10, and 11, not recorded on books this year (itemize):		<b>a</b> Tax-exempt interest	\$
<b>3</b> Guaranteed payments (other than health insurance)		<b>7</b> Deductions included on Schedule K, lines 1 through 13c, and 16a, not charged against book income this year (itemize):	
<b>4</b> Expenses recorded on books this year not included on Schedule K, lines 1 through 13d, and 16c (itemize):		<b>a</b> Depreciation	\$
<b>a</b> Depreciation	\$	<b>8</b> Add lines 6 and 7	
<b>b</b> Travel and entertainment	\$	<b>9</b> Income (loss) (Analysis of Net Income (Loss), line 1). Subtract line 8 from line 5	-186,688.
<b>5</b> Add lines 1 through 4	-186,688.		

**Schedule M-2 Analysis of Partners' Capital Accounts**

<b>1</b> Balance at beginning of year	283,995.	<b>6</b> Distributions: <b>a</b> Cash	
<b>2</b> Capital contributed: <b>a</b> Cash	767,940.	<b>b</b> Property	
<b>b</b> Property		<b>7</b> Other decreases (itemize):	
<b>3</b> Net income (loss) per books	-186,688.	<b>8</b> Add lines 6 and 7	
<b>4</b> Other increases (itemize):		<b>9</b> Balance at end of year. Subtract line 8 from line 5	865,247.
<b>5</b> Add lines 1 through 4	865,247.		

Form **1125-A**

(Rev. November 2018)

Department of the Treasury  
Internal Revenue Service**Cost of Goods Sold**

- Attach to Form 1120, 1120-C, 1120-F, 1120S, or 1065.  
► Go to [www.irs.gov/Form1125A](http://www.irs.gov/Form1125A) for the latest information.

OMB No. 1545-0023

Name

Employer identification number

GATA EF LLC

1862

1	Inventory at beginning of year	1	85,082.
2	Purchases	2	443,838.
3	Cost of labor	3	
4	Additional section 263A costs (attach schedule)	4	
5	Other costs (attach schedule)	5	
6	Total. Add lines 1 through 5	6	528,920.
7	Inventory at end of year	7	528,920.
8	Cost of goods sold. Subtract line 7 from line 6. Enter here and on Form 1120, page 1, line 2 or the appropriate line of your tax return. See instructions.	8	

9a Check all methods used for valuing closing inventory:

(i) ☐ Cost

(ii) ☐ Lower of cost or market

(iii) ☐ Other (Specify method used and attach explanation.) ►

b Check if there was a writedown of subnormal goods ..... ► ☐

c Check if the LIFO inventory method was adopted this tax year for any goods (if checked, attach Form 970) ..... ► ☐

d If the LIFO inventory method was used for this tax year, enter amount of closing inventory computed under LIFO: ..... 9d |

e If property is produced or acquired for resale, do the rules of section 263A apply to the entity? See instructions. .... ☐ Yes ☐ No

f Was there any change in determining quantities, cost, or valuations between opening and closing inventory? If "Yes," attach explanation. .... ☐ Yes ☐ No

BAA For Paperwork Reduction Act Notice, see instructions.

Form 1125-A (Rev. 11-2018)



**Schedule K-1**  
(Form 1065)Department of the Treasury  
Internal Revenue Service**2019**

For calendar year 2019, or tax year

beginning        /        / 2019 ending        /        /**Partner's Share of Income, Deductions, Credits, etc.**

See separate instructions.

**Part I Information About the Partnership****A** Partnership's employer identification number1862**B** Partnership's name, address, city, state, and ZIP codeGATA HF LLC  
1463 GRAYSTONE CANYON AVE  
LAS VEGAS, NV 89183**C** IRS Center where partnership filed return **e-file****D** ☐ Check if this is a publicly traded partnership (PTP)**Part II Information About the Partner****E** Partner's SSN or TIN (Do not use TIN of a disregarded entity. See instructions.)2407**F** Name, address, city, state, and ZIP code for partner entered in E. See instructions.GATA IV LLC  
1463 GRAYSTONE CANYON AVE  
LAS VEGAS, NV 89183**G** ☐ General partner or LLC member-manager ☒ Limited partner or other LLC member**H1** ☒ Domestic partner ☐ Foreign partner**H2** ☐ If the partner is a disregarded entity (DE), enter the partner's:TIN        Name       **I1** What type of entity is this partner? Partnership**I2** If this partner is a retirement plan (IRA/SEP/Keogh/etc.), check here ☐**J** Partner's share of profit, loss, and capital (see instructions):

	Beginning	Ending
Profit	50 %	50 %
Loss	50 %	50 %
Capital	50 %	50 %

Check if decrease is due to sale or exchange of partnership interest ☐**K** Partner's share of liabilities:

	Beginning	Ending
Nonrecourse	\$	\$
Qualified nonrecourse financing	\$	\$
Recourse	\$	\$

☐ Check this box if item K includes liability amounts from lower tier partnerships.**L Partner's Capital Account Analysis**

Beginning capital account	\$	141,998.
Capital contributed during the year	\$	383,970.
Current year net income (loss)	\$	-93,344.
Other increase (decrease) (attach explanation)	\$	
Withdrawals & distributions	\$	
Ending capital account	\$	432,624.

**M** Did the partner contribute property with a built-in gain or loss?☐ Yes ☒ No If "Yes," attach statement. See instructions.**N** Partner's Share of Net Unrecognized Section 704(c) Gain or (Loss)

Beginning	\$	
Ending	\$	

☐ Final K-1☐ Amended K-1651115  
OMB No. 1545-0123**Part III Partner's Share of Current Year Income, Deductions, Credits, and Other Items**

1	Ordinary business income (loss)	15	Credits
	-93,344.		
2	Net rental real estate income (loss)		
3	Other net rental income (loss)	16	Foreign transactions
4a	Guaranteed payments for services		
4b	Guaranteed payments for capital		
4c	Total guaranteed payments		
5	Interest income		
6a	Ordinary dividends		
6b	Qualified dividends		
6c	Dividend equivalents	17	Alternative minimum tax (AMT) items
		A	43.
7	Royalties		
8	Net short-term capital gain (loss)		
9a	Net long-term capital gain (loss)	18	Tax-exempt income and nondeductible expenses
9b	Collectibles (28%) gain (loss)		
9c	Unrecaptured section 1250 gain		
10	Net section 1231 gain (loss)		
11	Other income (loss)	19	Distributions
12	Section 179 deduction	20	Other information
		2*	STMC
13	Other deductions		
14	Self-employment earnings (loss)		
21	More than one activity for at-risk purposes*		
22	More than one activity for passive activity purposes*		

\*See attached statement for additional information.

This list identifies the codes used on Schedule K-1 for all partners and provides summarized reporting information for partners who file Form 1040 or 1040-SR. For detailed reporting and filing information, see the separate Partner's Instructions for Schedule K-1 and the instructions for your income tax return.

		Code	Report on
1	Ordinary business income (loss). Determine whether the income (loss) is passive or nonpassive and enter on your return as follows:		
	Passive loss		
	Passive income		
	Nonpassive loss		
	Nonpassive income		
2	Net rental real estate income (loss)		
3	Other net rental income (loss)		
	Net income		
	Net loss		
4a	Guaranteed payment Services		
b	Guaranteed payment Capital		
c	Guaranteed payment Total		
5	Interest income		
6a	Ordinary dividends		
b	Qualified dividends		
c	Dividend equivalents		
7	Royalties		
8	Net short-term capital gain (loss)		
9a	Net long-term capital gain (loss)		
9b	Collectibles (28%) gain (loss)		
9c	Unrecaptured section 1250 gain		
10	Net section 1231 gain (loss)		
11	Other income (loss)		
	Code		
	A Other portfolio income (loss)		
	B Involuntary conversions		
	C Sec. 1256 contracts & straddles		
	D Mining exploration costs recapture		
	E Cancellation of debt		
	F Section 743(a) positive adjustments		
	G Section 965(a) inclusion		
	H Income under subpart F (other than inclusions under sections 951A and 965)		
	I Other income (loss)		
12	Section 179 deduction		
13	Other deductions		
	A Cash contributions (60%)		
	B Cash contributions (30%)		
	C Noncash contributions (50%)		
	D Noncash contributions (30%)		
	E Capital gain property to a 50% organization (30%)		
	F Capital gain property (20%)		
	G Contributions (100%)		
	H Investment interest expense		
	I Deductions — royalty income		
	J Section 59(e)(2) expenditures		
	K Excess business interest expense		
	L Deductions — portfolio (other)		
	M Amounts paid for medical insurance		
	N Educational assistance benefits		
	O Dependent care benefits		
	P Preproductive period expenses		
	Q Commercial revitalization deduction for rental real estate activities		
	R Pensions and IRAs		
	S Restoration expense deduction		
	T through U		
	V Section 743(a) negative adjustments		
	W Other deductions		
	X Section 965(c) deduction		
14	Self-employment earnings (loss)		
	Note: If you have a section 179 deduction or any partner-level deductions, see the Partner's Instructions before completing Schedule SE.		
	A Net earnings (loss) from self-employment		
	B Gross farming or fishing income		
	C Gross non-farm income		
15	Credits		
	A Low-income housing credit (section 42(c)(5)) from pre-2008 buildings		
	B Low-income housing credit (other) from pre-2008 buildings		
	C Low-income housing credit (section 42(q)(5)) from post-2007 buildings		
	D Low-income housing credit (other) from post-2007 buildings		
	E Qualified rehabilitation expenditures (rental real estate)		
	F Other rental real estate credits		
	G Other rental credits		
	H Undistributed capital gains credit		
	I Biofuel producer credit		
	J Work opportunity credit		
	K Disabled access credit		
	L Empowerment zone employment credit		
	M Credit for increasing research activities		
	N Credit for employer social security and Medicare taxes		
	O Backup withholding		
	P Other credits		
16	Foreign transactions		
	A Name of country or U.S. possession		
	B Gross income from all sources		
	C Gross income sourced at partner level		
	Foreign gross income sourced at partnership level		
	D Reserved for future use		
	E Foreign branch category		
	F Passive category		
	G General category		
	H Other		
	Deductions allocated and apportioned at partner level		
	I Interest expense		
	J Other		
	Deductions allocated and apportioned at partnership level to foreign source income		
	K Reserved for future use		
	L Foreign branch category		
	M Passive category		
	N General category		
	O Other		
	Other information		
	P Total foreign taxes paid		
	Q Total foreign taxes accrued		
	R Reduction in taxes available for credit		
	S Foreign trading gross receipts		
	T Extraterritorial income exclusion		
	U through V		
	W Section 966 information		
	X Other foreign transactions		
17	Alternative minimum tax (AMT) items		
	A Post-1986 depreciation adjustment		
	B Adjusted gain or loss		
	C Depletion (other than oil & gas)		
	D Oil, gas, & geothermal — gross income		
	E Oil, gas, & geothermal — deductions		
	F Other AMT items		
18	Tax-exempt income and nondeductible expenses		
	A Tax-exempt interest income		
	B Other tax-exempt income		
	C Nondeductible expenses		
19	Distributions		
	A Cash and marketable securities		
	B Distribution subject to section 737		
	C Other property		
20	Other information		
	A Investment income		
	B Investment expenses		
	C Fuel tax credit information		
	D Qualified rehabilitation expenditures (other than rental real estate)		
	E Basis of energy property		
	F through G		
	H Recapture of investment credit		
	I Recapture of other credits		
	J Look-back interest — completed long-term contracts		
	K Look-back interest — income forecast method		
	L Dispositions of property with section 179 deductions		
	M Recapture of section 179 deduction		
	N Interest expense for corporate partners		
	O through V		
	Z Section 193A information		
	AA Section 704(c) information		
	AB Section 751 gain (loss)		
	AC Section 1(h)(5) gain (loss)		
	AD Deemed section 1250 unrecaptured gain		
	AE Excess taxable income		
	AF Excess business interest income		
	AG Gross receipts for section 594(e)		
	AH Other information		

GATA HF LLC 1862

Schedule K-1 (Form 1065) 2019

Supplemental Information

Page 3

Supplemental Information

Item L. Partner's Capital Account Analysis:  
Tax Basis

Partner 1: GATA IV LLC

2407

**Statement A—QBI Pass-through Entity Reporting (Schedule K-1, Box 20, Code Z)**

Partnership's name: <b>GATA HF LLC</b>		Partnership's EIN: <b>1862</b>	
Partner's name: <b>GATA IV LLC</b>		Partner's identifying number: <b>2407</b>	

	<b>GATA HF LLC</b>		
	<input type="checkbox"/> PTP	<input type="checkbox"/> PTP	<input type="checkbox"/> PTP
	<input type="checkbox"/> Aggregated	<input type="checkbox"/> Aggregated	<input type="checkbox"/> Aggregated
	<input type="checkbox"/> SSTB	<input type="checkbox"/> SSTB	<input type="checkbox"/> SSTB
<b>Partner's share of:</b>			

<b>QBI or qualified PTP items subject to partner-specific determinations:</b>			
	Ordinary business income (loss)	-93,344.	
	Rental income (loss) . . . . .		
	Royalty income (loss) . . . . .		
	Section 1231 gain (loss) . . . . .		
	Other income (loss) . . . . .		
	Section 179 deduction . . . . .		
	Charitable contributions . . . . .		
	Other deductions . . . . .		
W-2 wages . . . . .			
UBIA of qualified property . . . . .		88,257.	
Section 199A dividends			

	<input type="checkbox"/> PTP	<input type="checkbox"/> PTP	<input type="checkbox"/> PTP
	<input type="checkbox"/> Aggregated	<input type="checkbox"/> Aggregated	<input type="checkbox"/> Aggregated
	<input type="checkbox"/> SSTB	<input type="checkbox"/> SSTB	<input type="checkbox"/> SSTB
<b>Partner's share of:</b>			

<b>QBI or qualified PTP items subject to partner-specific determinations:</b>			
	Ordinary business income (loss)		
	Rental income (loss) . . . . .		
	Royalty income (loss) . . . . .		
	Section 1231 gain (loss) . . . . .		
	Other income (loss) . . . . .		
	Section 179 deduction . . . . .		
	Charitable contributions . . . . .		
	Other deductions . . . . .		
W-2 wages . . . . .			
UBIA of qualified property . . . . .			

**Schedule K-1**

(Form 1065)

Department of the Treasury  
Internal Revenue Service**2019**

For calendar year 2019, or tax year

beginning 1 / 1 / 2019 ending 1 / 1 /**Partner's Share of Income, Deductions, Credits, etc.**

▶ See separate instructions.

**Part I Information About the Partnership****A** Partnership's employer identification number1862**B** Partnership's name, address, city, state, and ZIP codeGATA HF LLC  
1463 GRAYSTONE CANYON AVE  
LAS VEGAS, NV 89183**C** IRS Center where partnership filed return ▶ e-file**D** ☐ Check if this is a publicly traded partnership (PTP)**Part II Information About the Partner****E** Partner's SSN or TIN (Do not use TIN of a disregarded entity. See instructions.)7408**F** Partner's name, address, city, state, and ZIP code (for partner entered in E. See instructions.)GATA LLC  
1463 GRAYSTONE CANYON AVE  
LAS VEGAS, NV 89183**G** ☐ General partner or LLC member-manager ☒ Limited partner or other LLC member**H1** ☒ Domestic partner ☐ Foreign partner**H2** ☐ If the partner is a disregarded entity (DE), enter the partner's:

TIN \_\_\_\_\_ Name \_\_\_\_\_

**I1** What type of entity is this partner? Partnership**I2** If this partner is a retirement plan (IRA/SEP/Keogh/etc.), check here ☐**J** Partner's share of profit, loss, and capital (see instructions):

	Beginning	Ending
Profit	50 %	50 %
Loss	50 %	50 %
Capital	50 %	50 %

Check if decrease is due to sale or exchange of partnership interest ☐**K** Partner's share of liabilities:

	Beginning	Ending
Nonrecourse	\$	\$
Qualified nonrecourse financing	\$	\$
Recourse	\$	\$

☐ Check this box if Item K includes liability amounts from lower tier partnerships.**L Partner's Capital Account Analysis**

Beginning capital account	\$	141,997.
Capital contributed during the year	\$	383,970.
Current year net income (loss)	\$	-93,344.
Other increase (decrease) (attach explanation)	\$	
Withdrawals & distributions	\$	
Ending capital account	\$	432,623.

**M** Did the partner contribute property with a built-in gain or loss?☐ Yes ☒ No If "Yes," attach statement. See instructions.**N** Partner's Share of Net Unrecognized Section 704(c) Gain or (Loss)

Beginning	\$
Ending	\$

☐ Final K-1☐ Amended K-1**Part III Partner's Share of Current Year Income, Deductions, Credits, and Other Items**

<b>1</b>	Ordinary business income (loss)	<b>15</b>	Credits
	-93,344.		
<b>2</b>	Net rental real estate income (loss)		
<b>3</b>	Other net rental income (loss)	<b>16</b>	Foreign transactions
<b>4a</b>	Guaranteed payments for services		
<b>4b</b>	Guaranteed payments for capital		
<b>4c</b>	Total guaranteed payments		
<b>5</b>	Interest income		
<b>6a</b>	Ordinary dividends		
<b>6b</b>	Qualified dividends		
<b>6c</b>	Dividend equivalents	<b>17</b>	Alternative minimum tax (AMT) items
		<b>A</b>	43.
<b>7</b>	Royalties		
<b>8</b>	Net short-term capital gain (loss)		
<b>9a</b>	Net long-term capital gain (loss)	<b>18</b>	Tax-exempt income and nondeductible expenses
<b>9b</b>	Collectibles (28%) gain (loss)		
<b>9c</b>	Unrecaptured section 1250 gain		
<b>10</b>	Net section 1231 gain (loss)	<b>19</b>	Distributions
<b>11</b>	Other income (loss)		
<b>12</b>	Section 179 deduction	<b>20</b>	Other information
		<b>Z*</b>	STMC
<b>13</b>	Other deductions		
<b>14</b>	Self-employment earnings (loss)		
<b>21</b>	More than one activity for at-risk purposes*		
<b>22</b>	More than one activity for passive activity purposes*		

\*See attached statement for additional information.



Schedule K-1 (Form 1065) 2019

GATA HF LLC 1862

Schedule K-1 (Form 1065) 2019

Supplemental Information

Page 3

Supplemental Information

Item L. Partner's Capital Account Analysis:  
Tax Basis

Partner 2: GATA LLC

7408

## Statement A—QBI Pass-through Entity Reporting (Schedule K-1, Box 20, Code Z)

Partnership's name: GATA HF LLC	Partnership's EIN: 1862
Partner's name: GATA LLC	Partner's identifying number: 7408

GATA HF LLC			
<input type="checkbox"/> PTP	<input type="checkbox"/> PTP	<input type="checkbox"/> PTP	
<input type="checkbox"/> Aggregated	<input type="checkbox"/> Aggregated	<input type="checkbox"/> Aggregated	
<input type="checkbox"/> SSTB	<input type="checkbox"/> SSTB	<input type="checkbox"/> SSTB	
Partner's share of:			

## QBI or qualified PTP items subject to partner-specific determinations:

Ordinary business income (loss)	- 93,344.		
Rental income (loss)			
Royalty income (loss)			
Section 1231 gain (loss)			
Other income (loss)			
Section 179 deduction			
Charitable contributions			
Other deductions			
W-2 wages			
UBIA of qualified property	88,257.		
Section 199A dividends			

<input type="checkbox"/> PTP	<input type="checkbox"/> PTP	<input type="checkbox"/> PTP	
<input type="checkbox"/> Aggregated	<input type="checkbox"/> Aggregated	<input type="checkbox"/> Aggregated	
<input type="checkbox"/> SSTB	<input type="checkbox"/> SSTB	<input type="checkbox"/> SSTB	
Partner's share of:			

## QBI or qualified PTP items subject to partner-specific determinations:

Ordinary business income (loss)			
Rental income (loss)			
Royalty income (loss)			
Section 1231 gain (loss)			
Other income (loss)			
Section 179 deduction			
Charitable contributions			
Other deductions			
W-2 wages			
UBIA of qualified property			



**SCHEDULE B-1**  
**(Form 1065)**  
 (Rev. August 2019)  
 Department of the Treasury  
 Internal Revenue Service

**Information on Partners Owning 50% or  
 More of the Partnership**

▶ Attach to Form 1065.

▶ Go to [www.irs.gov/Form1065](http://www.irs.gov/Form1065) for the latest information.

OMB No. 1545-0123

Name of partnership

GATA HF LLC

Employer identification number (EIN)

1862

**Part I** **Entities Owning 50% or More of the Partnership** (Form 1065, Schedule B, Question 2a (Question 3a for 2009 through 2017))

Complete columns (i) through (v) below for any foreign or domestic corporation, partnership (including any entity treated as a partnership), trust, tax-exempt organization, or any foreign government that owns, directly or indirectly, an interest of 50% or more in the profit, loss, or capital of the partnership (see instructions).

(i) Name of Entity	(ii) Employer Identification Number (if any)	(iii) Type of Entity	(iv) Country of Organization	(v) Maximum Percentage Owned in Profit, Loss, or Capital
GATA IV LLC	2407	Ptrship.	U.S.	50.000
GATA LLC	7408	Ptrship.	U.S.	50.000

**Part II** **Individuals or Estates Owning 50% or More of the Partnership** (Form 1065, Schedule B, Question 2b (Question 3b for 2009 through 2017))

Complete columns (i) through (iv) below for any individual or estate that owns, directly or indirectly, an interest of 50% or more in the profit, loss, or capital of the partnership (see instructions).

(i) Name of Individual or Estate	(ii) Identifying Number (if any)	(iii) Country of Citizenship (see instructions)	(iv) Maximum Percentage Owned in Profit, Loss, or Capital

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 1065.

Schedule B-1 (Form 1065) (Rev. 8-2019)

Form **4562****Depreciation and Amortization**  
(Including Information on Listed Property)

OMB No. 1545-0172

**2019**Department of the Treasury  
Internal Revenue Service (99)

▶ Attach to your tax return.

▶ Go to [www.irs.gov/Form4562](http://www.irs.gov/Form4562) for instructions and the latest information.Attachment  
Sequence No. **179**

Name(s) shown on return

Identifying number

**GATA HF LLC****1862**

Business or activity to which this form relates

Form **1065****Part I Election To Expense Certain Property Under Section 179**

Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	1,020,000.
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	2,550,000.
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2018 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instr.	11	
12	Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11	12	
13	Carryover of disallowed deduction to 2020. Add lines 9 and 10, less line 12	13	

Note: Don't use Part II or Part III below for listed property. Instead, use Part V.

**Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.)**

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year. See instructions	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	

**Part III MACRS Depreciation (Don't include listed property. See instructions.)****Section A**

17	MACRS deductions for assets placed in service in tax years beginning before 2019	17	858.
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here <input type="checkbox"/>		

**Section B — Assets Placed in Service During 2019 Tax Year Using the General Depreciation System**

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only — see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19 a 3-year property						
b 5-year property						
c 7-year property		161,327.	7	HY	200DB	23,054.
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs		S/L	
h Residential rental property			27.5 yrs	MM	S/L	
i Nonresidential real property			27.5 yrs	MM	S/L	
			39 yrs	MM	S/L	
				MM	S/L	

**Section C — Assets Placed in Service During 2019 Tax Year Using the Alternative Depreciation System**

20 a Class life				S/L	
b 12-year		12 yrs		S/L	
c 30-year		30 yrs	MM	S/L	
d 40-year		40 yrs	MM	S/L	

**Part IV Summary (See instructions.)**

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations — see instructions	22	23,912.
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

2019

## Federal Statements

Page 1

GATA HF LLC

1862

Statement 1  
Form 1065, Line 20  
Other Deductions

Advertising.....	\$	74.
Auto and Truck Expense.....		1,740.
Insurance.....		1,582.
Legal and Professional.....		20,340.
SECURITY.....		10.
Supplies.....		7,538.
Telephone.....		665.
Tools.....		97.
Travel.....		4,685.
Utilities.....		25,142.
Total	\$	<u>61,873.</u>

Statement 2  
Form 1065, Schedule L, Line 13  
Other Assets

	Beginning	Ending
Rounding.....	\$ 4.	\$ 0.
Total	<u>\$ 4.</u>	<u>\$ 0.</u>

**Pahrump Farm**  
**Balance Sheet As at 12/31/2020**

**ASSET**

**Capital Assets**

Leasehold Improvements		23,890.97
Equipment	90,393.98	
Grow Equipment	86,116.67	
Security Equipment	9,971.60	
Net - Furniture & Equipment		186,482.25
Land		1,174,815.00
<b>Total Capital Assets</b>		<u>1,385,188.22</u>

**TOTAL ASSET** 1,385,188.22

**LIABILITY**

**Current Liabilities**

Accounts Payable		20,365.00
Mortgage Payable		1,500,000.00
Edlin Kim Loan	205,000.00	
Joe Casper Loan	312,921.18	
Total Unsecured Loans		517,921.18
<b>Total Current Liabilities</b>		<u>2,038,286.18</u>

**Long Term Liabilities**

Loan from Member - Paul Thomas	84,073.50	
Loans from Members		84,073.50
<b>Total Long Term Liabilities</b>		<u>84,073.50</u>

**TOTAL LIABILITY** 2,122,359.68

**EQUITY**

**Retained Earnings**

Retained Earnings - Previous Year		-741,257.52
Current Earnings		4,086.06
<b>Total Retained Earnings</b>		<u>-737,171.46</u>

**TOTAL EQUITY** -737,171.46

**LIABILITIES AND EQUITY** 1,385,188.22

**Pahrump Farm**  
**Income Statement 01/01/2020 to 12/31/2020**

**REVENUE**

<b>Sales Revenue</b>	
Revenue - Product	922,500.00
<b>Net Sales</b>	<u>922,500.00</u>
 <b>Other Revenue</b>	
Revenue - Lease	20,000.00
<b>Total Other Revenue</b>	<u>20,000.00</u>
 <b>TOTAL REVENUE</b>	<u>942,500.00</u>

**EXPENSE**

<b>Cost of Goods Sold</b>	
Grow Bags	55.94
Nutrients	3,701.90
Packaging	2,234.73
Soil	4,358.89
Grow Supplies Other	17,470.28
Subcontracts	277,319.75
<b>Total Cost of Goods Sold</b>	<u>305,141.49</u>
 <b>General &amp; Administrative Expenses</b>	
Accounting & Legal	5,446.83
Advertising & Promotions	100.00
Business Fees & Licenses	19,191.55
Commissions	30,000.00
Lender Fees	273,965.18
Insurance	8,432.81
Mortgage Interest	227,316.67
Supplies	10,102.50
Security	470.19
Property Taxes	7,031.68
Motor Vehicle Expenses	214.55
Rent	335.47
Repair & Maintenance	8,005.71
Telephone & Internet	3,826.34
Travel	1,880.58
Utilities	36,952.39
<b>Total General &amp; Admin. Expenses</b>	<u>633,272.45</u>
 <b>TOTAL EXPENSE</b>	<u>938,413.94</u>
 <b>NET INCOME</b>	<u>4,086.06</u>

**Pahrump Farm**  
**Balance Sheet As at 09/30/2021**

**ASSET**

**Capital Assets**

Leasehold Improvements		23,890.97
Equipment	90,393.98	
Grow Equipment	86,116.67	
Security Equipment	9,971.60	
Net - Furniture & Equipment		186,482.25
Land		1,174,815.00
<b>Total Capital Assets</b>		<u>1,385,188.22</u>

**TOTAL ASSET** 1,385,188.22

**LIABILITY**

**Current Liabilities**

Accounts Payable		25,615.00
Mortgage Payable		2,073,800.00
Edlin Kim Loan	205,000.00	
Joe Casper Loan	312,921.18	
Total Unsecured Loans		517,921.18
<b>Total Current Liabilities</b>		<u>2,617,336.18</u>

**Long Term Liabilities**

Loan from Member - Paul Thomas	78,672.44	
Loans from Members		78,672.44
<b>Total Long Term Liabilities</b>		<u>78,672.44</u>

**TOTAL LIABILITY** 2,696,008.62

**EQUITY**

**Retained Earnings**

Retained Earnings - Previous Year	-737,171.46	
Current Earnings	-573,648.94	
<b>Total Retained Earnings</b>		<u>-1,310,820.40</u>

**TOTAL EQUITY** -1,310,820.40

**LIABILITIES AND EQUITY** 1,385,188.22

**Pahrump Farm**  
**Income Statement 01/01/2021 to 09/30/2021**

**REVENUE**

Other Revenue	
Revenue - Lease	90,000.00
<b>Total Other Revenue</b>	<u>90,000.00</u>
<b>TOTAL REVENUE</b>	<u>90,000.00</u>

**EXPENSE**

Cost of Goods Sold	
Grow Supplies Other	1,088.62
Subcontracts	50,854.25
<b>Total Cost of Goods Sold</b>	<u>51,942.87</u>

**General & Administrative Expenses**

Accounting & Legal	8,250.00
Business Fees & Licenses	865.84
Insurance	5,328.00
Mortgage Interest	573,800.00
Supplies	179.41
Repair & Maintenance	3,958.00
Telephone & Internet	1,755.02
Travel	2,789.00
Utilities	14,780.80
<b>Total General &amp; Admin. Expenses</b>	<u>611,706.07</u>

<b>TOTAL EXPENSE</b>	<u>663,648.94</u>
----------------------	-------------------

<b>NET INCOME</b>	<u><u>-573,648.94</u></u>
-------------------	---------------------------